

STATE OF TENNESSEE DEPARTMENT OF COMMERCE AND INSURANCE

Financial Affairs Section / Analytical Unit 0576 500 James Robertson Parkway, 4th Floor Nashville, Tennessee 37243 (615) 741-1633

Date:

Company: Company Contact: Address: City, ST Zip:	
RE:	ACQUISITION OF <u>Sample Insurance Company</u> (NAIC# <u>999999</u>), A CORPORATION DOMICILED IN THE <u>DomiciliaryState</u> , BY <u>AcquiringCorp</u>
To Whom It May Concern:	
This will acknowledge receipt of your notification concerning the acquisition. To allow this Department to properly record the acquisition, the following documents must be filed:	
PLEASE PROVIDE	ITEM
\boxtimes	Certified copy of the acquisition approval granted by the DomiciliaryState Department of Insurance.
\boxtimes	Original biographical affidavits on any newly elected officers and directors. Please be advised that the biographical affidavits must be properly notarized, and all signatures must be original.
\boxtimes	A written statement that, as a result of the acquisition, Sample Insurance Company will not be in violation of Tennessee Annotated Section 56-11-204.
Upon completion of this process, The company will be billed on a retaliatory basis.	
Please provide an e-mail address. Should you have any questions, feel free to contact me at (615) 741-1670, or at phil.adams@state.tn.us .	
Regard	ls,
Phil Adams Analyst	